

POSITION	ID. NO.	DATE
CLASSIFIER	56	5/10/93
EXAMINER	357	5/12/93
TYPIST	359	5-13-93
VERIFIER	240	5-13-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
1	1	✓	6/1/93
2	2	✓	6/3/93
3	3	✓	6/3/93
4	4	✓	6/3/93
5	5	✓	6/3/93
6	6	✓	6/3/93
7	7	✓	6/3/93
8	8	✓	6/3/93
9	9	✓	6/3/93
10	10	✓	6/3/93
11	11	✓	6/3/93
12	12	✓	6/3/93
13		✓	
14		✓	
15	15	✓	6/3/93
16	16	✓	6/3/93
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through number) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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